

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Majority PAC			FEC IDENTIFICATION NUMBER ▼ C C00484642		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>		
Full Name of Payee Blueprint Interactive			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 30 / 2016		
Mailing Address 1155 Connecticut Ave NW Ste 601			Amount 79800.00		
City Washington State DC Zip Code 20036-4306		Transaction ID : VN7GBA2SHS6 Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure Online Advertising		Category/ Type			
Name of Federal Candidate Kelly Ayotte		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		5732732.91		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee SKDKnickerbocker			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 30 / 2016		
Mailing Address 1150 18th St NW Ste 800			Amount 16674.00		
City Washington State DC Zip Code 20036-3845		Transaction ID : VN7GBA2SHW0 Date of Disbursement or Obligation MM / DD / YYYY			
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type			
Name of Federal Candidate Kelly Ayotte		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH	
Calendar Year-To-Date Per Election for Office Sought		5732732.91		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			96474.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Rebecca Lambe		[Electronically Filed]		Date MM / DD / YYYY 08 / 31 / 2016	